

# Apex Locators

U.S. Army Endodontic Short Course 2004  
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## I. Development of the apex locator:

- a. 1918- Custer observes that there is a change in electrical conductivity between the root canal and the periradicular tissues.
- b. 1942- Suzuki observes a constant resistance between the PDL and oral mucosa regardless of the patient or tooth.
- c. 1962- Sunada measures the electric resistance between PDL and the oral mucosa to be 6500 ohms.

## II. Three types of apex locators:

- a. Resistance
- b. Impedance
- c. Frequency

## III. Apical anatomy:

- a. Anatomic apex- The tip or end of the root as determined morphologically.
- b. Radiographic apex- The tip or end of the root as determined radiographically, its location can vary from the anatomic apex due to root morphology and distortion of the radiographic apex.
- c. Cementodentinal junction (CDJ)- The region at which the dentin and cementum are united; commonly use to denote the point at which the cemental surface terminates at or near the apex of a tooth; position can range from 0.5 mm to 3.0 mm from the anatomic apex.
- d. Apical constriction (minor diameter)- The apical portion of the root canal having the narrowest diameter; position may vary but is usually 0.5 mm-1.0 mm short of the center of the apical foramen.
- f. Apical foramen- The main apical opening of the root canal.

## IV. The apical foramen:

- a. Green (1955)- The major apical foramina are situated directly at the apices more frequently in the maxillary anteriors and 1<sup>st</sup> premolars and mandibular 2<sup>nd</sup> premolars.
- b. Burch and Hulen (1962)- The average distance from the anatomic apex to the most occlusal point of the apical foramen is 0.59mm.
- c. Kuttler (1955)- The distance between the apical constriction and the apical foramen averages 0.507 mm in younger and 0.784 mm in older individuals.

## V. Accuracy of apex locators:

- a. Shabahang et al. (1996)- Root ZX was accurate to within 0.5mm of the apical foramen 96.2% of the time for vital teeth.
- b. Pagavino et al. (1998)- Root ZX was accurate to within 0.5mm of the apical foramen 82.75% of the time.

## VI. Conduction media (irrigant)

- a. Sodium hypochlorite
- b. RC Prep
- c. Local anesthetic
- d. Saline

## VI. Trouble shooting:

- a. Meter display does not advance
  - 1. Calcified canal
  - 2. Canal obstruction
  - 3. Dry canal
  - 4. Root form restricts navigation
  - 5. Apex surrounded by pustule
- b. Meter overreacts as file enters the canal
  - 1. Large foramen
  - 2. Pulp chamber wet
  - 3. Perforation
  - 4. Small file
  - 5. Pulp in chamber
  - 6. File touching metal restoration
  - 7. Leaking restoration

## VII. Testing you unit:

- a. Place file holder and lip clip 1 cm apart on your moistened finger. This should give a consistent reading.

## VIII. Specific Products

- a. Root ZX (J. Morita Co., Kyoto, Japan) \$929
- b. Bingo 1020 (DentCorp, White Plains, NY USA) \$794
- c. Elements Apex Locator (SybronEndo, Orange, CA, USA) \$895